



**BLOFIELD & FLEGG
RURAL DISTRICT COUNCIL**

ANNUAL REPORT
of the
MEDICAL OFFICER OF HEALTH
including the report of the Senior Public Health Inspector
for the
YEAR 1965

MEMBERS OF THE PUBLIC HEALTH COMMITTEE

1965

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PUBLIC HEALTH DEPARTMENT, 1965

Medical Officer of Health:

DR. G. R. HOLTBY, M.D., B.S., M.R.C.S., L.R.C.P., D.P.H., D.I.H.

Senior Public Health Inspector:

A. G. LAKE, A.R.S.H., F.A.P.H.I.

Deputy Senior Public Health Inspector:

H. R. C. STRANGE, M.A.P.H.I.

Additional Inspectors:

G. H. ALLISON, A.R.S.H., M.A.P.H.I.

R. M. FLETCHER, M.R.S.H., M.A.P.H.I.

Senior Clerk:

Mr. B. A. J. MUNRO A.R.S.H.

Junior Clerk:

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To: The Chairman and Members of the
Blofield and Flegg Rural District Council.

Ladies and Gentlemen,

I have the honour to present the Annual Report for the year 1965. The Registrar General estimates the mid-year population as 37,740 compared with 36,540 last year. There were 571 live births and 599 deaths giving a natural decrease of 28. There was therefore a movement into the district of 1,228 people.

There is no doubt benefit to be gained by a periodical review of what has been achieved in the improvement of the health of the public. If such a review were to cover a period of several decades, the results would be seen to be remarkable. People seldom notice that they are free from disease, and if they do not have physical illness to worry about other cares and worries tend to crowd in to "fill the vacuum".

If at any time comments are made about the relative infrequency nowadays of cases of serious infectious diseases, this tends to be attributed to a beneficent Nature rather than to the efforts and vigilance of the preventive services.

It would, however, be too big a task on this occasion to detail every advance or to make any comprehensive review of successes gained. It may be more valuable instead to think of some ways in which public health has not advanced or has indeed deteriorated, particularly in this part of Norfolk.

It may be salutary to look first at the failure of our campaign against cigarette smoking and for fluoridation of water supplies. There can be no argument about the facts in either case.

In 1965 there were 26,399 deaths from lung cancer (the numbers increase by 1,000 or more every year) and at least 90% of these deaths would not have occurred had the victims not acquired the smoking habit.

Fluorides are widespread in nature, and are present in most foods and beverages and as a natural constituent in almost all drinking waters, in which the concentration of the fluoridation varies from a trace (less than 0.2 part per million) to several parts per million. Fluoridation merely means the adjustment of the level in water supplies to one part per million. It would undoubtedly improve dental health greatly by increasing the resistance to dental decay.

Evidently facts are not themselves sufficient to convince the public. Are the vested interests in opposition too strong? It certainly looks like it. In one case, there are enormous beautifully produced posters, depicting (or recently suggesting) the "good life", the pleasure always completed or the manly effort followed, by a cigarette. How elegant it is to smoke and how befitting a vigorous outdoor "type". No explanation is given that people smoke in company because they are nervous and don't know what to do with their hands, no mention is made of the ghastly morning hacking, which is the smokers cough, no list is appended of goods which might have been bought instead of tobacco, and it is never hinted that serious athletes would never dream of smoking, or that non-smokers can climb hills faster than smokers half their age.

The opposition to fluoridation is probably not primarily commercial, and it is difficult to discover the real motive. It is, however, often associated with opposition to vaccination and other forms of immunisation. The people who subscribe to it may be well meaning, though misguided.

From this source, that is from the opposition, there is distributed to local authority councillors and others, well produced documents of pseudo-scientific nonsense calculated to convince the lay mind. Sometimes the names of some medical men are mentioned as opposing fluoridation, but usually they live far away or have obscure qualifications.

The entrenched strength of the tobacco industry and of the anti-fluoridation movement may be sufficient to explain why the advance of public health is held up on these fronts, but I fancy that there are other factors in addition.

Orthodoxy has perhaps always been a fair target for attack. One instinctively supports its lone or puny opponent, and many great discoveries have been made by those who oppose dogma with reason.

Questioning of established thought and practice, and of the "establishment", seems to be more prevalent now than ever, due perhaps to disillusion with previous failure to keep the peace of the world, or the health of its children, coupled with improved means of mass communication. In essence it is to be approved of - this way lies advance. The restless probing mind should consider all aspects of life.

Opposition to orthodoxy, however, must be based on reason. It deserves no support when based on emotionalism, and when the good of the community is at stake, a heavy responsibility lies on those who resist healthful measures. In the case of fluoridation, the weight of reason as well as the combined opinion of the medical, dental and public health professions supports this protection of dental health.

The weight of evidence against smoking is equally strong, but here there is also the factor of addiction. The power of a drug has to be broken when smoking is stopped and this can prove difficult. It is better never to start, but many people have shown that it is possible to give up the habit.

Failure to prevent road accidents can hardly be laid at the door of the medical profession, but perhaps we have not done all we can to publicise what we have learned about some very definite hazards, and how they can be countered. We know for example that wearing of seat belts for all journeys definitely reduces the severity of accidents. We know also that for drivers and passengers of two wheeled vehicles (including pedal cycles) the great hazard is injury to the brain; and we know that the wearing of crash helmets greatly reduces the chances of such injury.

Every year people are drowned on the Broads, although we know that the wearing of life jackets can prevent these tragedies. Almost every year there are cases of tetanus, although we know that a course of injections would prevent them, and every year many people suffer from food poisoning and dysentery, although we know that there would be very few cases if hands were washed after every visit to the lavatory and before food was handled.

The germs causing food poisoning infect animals, as well as man, and cattle are particularly liable to be infected. Calves are at present being bought by dealers a few days after birth and are then transported to another part of the country, where they are kept in close proximity to other calves until they are taken to market (and conditions in markets are not always such as to prohibit infection), and any calves which are unsold are taken back to the dealers' premises until the next market. When they are finally sold to a farmer they are very likely to be infected, and infective to other animals on the farm. What makes the situation even worse, is that the germs causing many of these infections have become resistant to antibiotics.

What is to be done about this state of affairs is not primarily a medical problem, but it would certainly seem wise of farmers to prefer calves which have not travelled long distances from their place of birth.

Hypothermia is now a word used to describe the condition in old people and also in young babies when the body temperature falls excessively. It can be very dangerous as if not reversed it is liable to be fatal. Unfortunately, in our exposed eastern position, cold winters are very likely to occur any every effort should be made to prevent old people running the risk of developing the condition. There must be adequate warmth in their houses and also adequate food. At the same time it is important to provide a sufficiency of vitamins such as those found in fresh salads and vegetables, as the needs of the elderly in this respect are probably greater than those of younger people.

In conclusion, I should like to thank the Chairman and Members of the Public Health Committee for their continued interest in the work of the Department, and the staff, including the clerical staff, for their loyal support and efficiency as in previous years.

I have the honour to remain, Ladies and Gentlemen,

Your obedient servant,

G.R. HOLTBY,

Medical Officer of Health.

October, 1966.

SECTION A.

NATURAL AND SOCIAL CONDITIONS.

Area - (in acres) 74,531. There are 33 parishes within the area which has its administrative centre at Acle. The major portion of the District is rural in character, Agriculture and Dairy Farming being the main industry. The District is a very popular summer resort catering for many thousands of visitors during the holiday season, the numbers increasing each year; it includes a large area of the Broads and many miles of pleasant inland waterways. Some of the best beaches in the country are to be found on its eight miles of coastline which extends from the boundary of Great Yarmouth northwards to Horsey.

Population - The Registrar General has estimated the population for the mid-year 1965 as 37,740 giving a population density of approximately .5 per acre.

SUMMARY OF VITAL STATISTICS.

Area in acres	...	...	...	...	...	...	...	74,531
Population (Registrar-General mid-June estimate)	...							37,740
No. of Inhabited Houses (1965) according to Ratebook								13,617
Rateable Value	...	...	...	...	...	...	...	£1,051,169
Estimated Net Produce of 1d. Rate				...	...	...	£	4,300

LIVE BIRTHS

	<u>Male.</u>	<u>Female.</u>	<u>Total.</u>
Legitimate	275	270	545
Illegitimate	<u>16</u>	<u>10</u>	<u>26</u>
Total	<u>291</u>	<u>280</u>	<u>571</u>

Live Birth Rate per 1,000 of estimated resident population -

Blofield & Flegg R.D.	Crude Birth Rate	15.21
	Standard Birth Rate	16.78
England and Wales	Standard Birth Rate	18.00

STILL BIRTHS

	<u>Male.</u>	<u>Female.</u>	<u>Total.</u>
Legitimate	4	4	8
Illegitimate	<u>1</u>	<u>-</u>	<u>1</u>
Total	<u>5</u>	<u>4</u>	<u>9</u>

Still Birth Rate per 1,000 total live and still births -

Blofield & Flegg R.D.	15.51
England and Wales	15.70
Total live and still births	580

INFANT MORTALITY (Death of infants under one year)

	<u>Male.</u>	<u>Female.</u>	<u>Total.</u>
Legitimate	7	2	9
Illegitimate	<u>-</u>	<u>-</u>	<u>-</u>
Total	<u>7</u>	<u>2</u>	<u>9</u>

Infant Mortality Rate per 1,000 live births -

Blofield & Flegg R.D.	15.76
England and Wales	19.00

Infant Mortality Rate per 1,000 live births -

Blofield & Flegg R.D.	Legitimate	15.76
	Illegitimate	0.0

Infant Mortality - Neo Natal (first four weeks).

	<u>Male.</u>	<u>Female.</u>	<u>Total.</u>
Legitimate	4	1	5
Illegitimate	-	-	-
Total	<u>4</u>	<u>1</u>	<u>5</u>

Neo-Natal Mortality Rate (deaths under 4 weeks per 1,000 total live births) - 7.0

Early neo-natal mortality rate (deaths under 1 week per 1,000 total live births) - 7.0

Peri-natal mortality rate (still births and deaths of infants under one week of age - 31.03

Illegitimate live births per cent of total live births - 4.55

MATERNAL MORTALITY.

Deaths associated with pregnancy, childbirth or abortion - None.

Deaths (all causes) -

<u>Male.</u>	<u>Female.</u>	<u>Total.</u>
300	299	599

Death rate per 1,000 of estimated resident population -

Blofield & Flegg R.D. - Crude Death Rate 15.87
Standard Death Rate 9.99

England and Wales Standard Death Rate 11.5

Maternal mortality rate per 1,000 live and still births - None.

BIRTH RATE, DEATH RATE AND INFANT MORTALITY RATE.

England and Wales. Blofield & Flegg R.D. (Standard Rates).

Births: Rates per 1,000 Population.
Live Births 18.0 16.78
Still Births 15.7 15.51

Deaths:
All causes (excluding Still Births) 11.5 9.99
Rates per 1,000 Live Births.

Infant Mortality:
All causes under 1 year 19.0 15.76

Deaths from Cancer and Total Deaths.

	1960	1961	1962	1963	1964	1965
No. of deaths from Cancer	81	79	87	92	76	86
No. of deaths all causes	470	546	546	633	519	599
% of total deaths due to Cancer	17.2	14.5	16.0	14.5	12.7	14.4

Cancer Deaths during last 6 years.

Male.				Female.		
Year	Total Deaths.	Lung Cancer.	Other Cancers.	Total Deaths.	Lung Cancer.	Other Cancers.
1965	300	18	33	299	2	33
1964	235	11	33	284	3	29
1963	287	8	27	346	-	57
1962	257	16	28	289	2	41
1961	254	10	30	292	2	37
1960	229	16	26	241	1	38

Deaths from Coronary Disease - Angina.

	1960	1961	1962	1963	1964	1965
No. of deaths from Coronary disease	60	84	69	93	73	112
No. of deaths all causes	470	546	546	633	519	599
% of total deaths due to Coronary disease	12.8	15.4	12.6	14.7	14.1	18.7

Deaths from Coronary disease during last 6 years.

Male.			Female.	
Year	Total Deaths.	Coronary-Agina.	Total Deaths.	Coronary-Agina.
1965	300	75	299	37
1964	235	44	284	29
1963	287	56	346	37
1962	257	46	289	23
1961	254	48	292	36
1960	229	33	241	27

INDIVIDUAL CAUSES OF DEATH.

	<u>Male</u>	<u>Female</u>	<u>Total</u>
1. Tuberculosis, respiratory	-	1	1
2. Tuberculosis, other	-	-	-
3. Syphilitic disease	-	2	2
4. Diphtheria	-	-	-
5. Whooping Cough	-	-	-
6. Meningococcal infections	-	-	-
7. Acute Poliomyelitis	-	-	-
8. Measles	-	-	-
9. Other infective and parasitic diseases	-	-	-
10. Malignant neoplasm, stomach	6	2	8
11. Malignant neoplasm, lung, bronchus	18	2	20
12. Malignant neoplasm, breast	-	6	6
13. Malignant neoplasm, uterus	-	4	4
14. Other malignant & Lymphatic neoplasms	27	21	48
15. Leukaemia Aleukaemia	4	-	4
16. Diabetes	5	5	10
17. Vascular lesions of nervous system	40	32	72
18. Coronary disease, angina	75	37	112
19. Hypertension with heart disease	4	7	11
20. Other heart disease	47	95	142
21. Other circulatory disease	9	12	21
22. Influenza	4	2	6
23. Pneumonia	17	24	41
24. Bronchitis	6	7	13
25. Other diseases of respiratory system	6	2	8
26. Ulcer of stomach and duodenum	1	2	3
27. Gastritis, enteritis and diarrhoea	1	2	3
28. Nephritis and Nephrosis	-	1	1
29. Hyperplasia of prostate	4	-	4
30. Pregnancy, childbirth, abortion	-	-	-
31. Congenital malformations	2	1	3
32. Other defined and ill-defined diseases	16	18	34
33. Motor vehicle accidents	4	2	6
34. All other accidents	3	10	13
35. Suicide	1	2	3
36. Homicide and operations of war	-	-	-
All causes	300	299	599

NOTIFICATIONS OF DEATHS RECEIVED DURING YEAR 1965
ACCORDING TO AGE GROUPS.

	<u>Male.</u>	<u>Female.</u>	<u>Total.</u>
Under 4 weeks"	4	1	5
4 weeks and under 1 year	3	1	4
1 - 4	1	-	1
5 - 14	1	3	4
15 - 24	4	1	5
25 - 34	2	1	3
35 - 44	6	5	11
45 - 54	21	16	37
55 - 64	45	29	74
65 - 74	83	65	148
75 and over	130	177	307
	<u>300</u>	<u>299</u>	<u>599</u>

INFANT MORTALITY (Under One Year).

	<u>Male.</u>	<u>Female.</u>	<u>Total.</u>
Acute bronchiolitis	2	-	2
Broncho pneumonia	1	-	1
Atelactasis. Prematurity	-	1	1
Prematurity	2	1	3
Inhaled vomit. Enteritis			
Urinary infection.	-	1	1
Cerebral hoemorrhage. Intra-uterine asphyxia. Forceps delivery.	1	-	1
	<u>6</u>	<u>3</u>	<u>9</u>

VITAL STATISTICS OF THE DISTRICT FOR 1965 AND PREVIOUS
YEARS COMPARATIVE TABLE WITH ENGLAND AND WALES FOR THE PAST FIVE YEARS.

	<u>1961.</u>	<u>1962.</u>	<u>1963.</u>	<u>1964.</u>	<u>1965.</u>
<u>Live Birth Rate (standardised)</u> <u>per 1,000 population.</u>					
England and Wales	17.4	18.00	18.2	18.4	18.00
Blofield and Flegg R.D.	14.7	14.53	14.27	15.91	16.78
<u>Still Birth Rate 1,000 total</u> <u>(live and still) births.</u>					
England and Wales	19.1	18.1	17.3	16.3	15.70
Blofield and Flegg R.D.	16.8	17.09	15.9	18.73	15.51
<u>Death Rate (standardised)</u> <u>per 1,000 population.</u>					
England and Wales	12.0	11.9	12.2	11.3	11.50
Blofield and Flegg R.D.	10.83	10.65	10.91	9.58	9.99
<u>Infant Mortality Rate per</u> <u>1,000 Live Births.</u>					
England and Wales	21.4	21.4	21.1	20.0	19.00
Blofield and Flegg R.D.	14.94	14.95	20.2	5.72	15.76

SECTION 'B'.

GENERAL PROVISIONS. OF THE HEALTH SERVICES.

Blofield and Flegg Rural District is included with Smallburgh Rural District and North Walsham Urban District to form No.1 Area of the Norfolk County Council, for the purposes of carrying out the duties for which the County Health Authority has accepted responsibility under the National Health Service Act. These include the Care of Mothers and Young Children, Midwifery Service, Home Nursing Service, Vaccination and Immunisation, Prevention of Illness, Care and After Care, Domestic Help Service and Mental Health Service. Some of these services along with the School Health Service in the area are the responsibility of the Area Medical Officer who also acts as Medical Officer of Health of the three County Districts comprising Area No.1, referred to above (Tel. Norwich 22288). There are four Health Visitors and nine District Nurses with centres at the following places:-

Acle	Unionist Hall.	Second Thursday each month.
Blofield	Margaret Harker Hall.	Last Thursday each month.
Blofield Corner	Village Hall.	Second Thursday each month.
Brundall	Memorial Hall.	Last Thursday each month.
Caister	Parish Hall.	Second and last Wednesday each month. (Doctor attends last Wednesday).
Cantley	Village Hall.	Third Tuesday each month.
Fleggburgh	Village Hall.	First Friday each month.
Halvergate	Church Room.	Second Friday each month.
Hensby	The Institute.	Third Thursday each month.
Lingwood	Recreation Hall.	Third Thursday each month.
Martham	Church Room.	Second Thursday each month.
Ornesby	Church Hall.	Second Friday each month.
Reedham	Church Hall.	First Thursday each month.
South Walsham	Village Hall.	Second Tuesday each month.
Thorpe (1)	Roxley.	Last Thursday each month.
Thorpe (2)	Shakespeare Memorial Baptist Church Hall Witard Road.	Every Tuesday (Doctor attends third and last Tuesday).

Doctor attends all Clinics where there is an attendance of 25 or over.

Other Treatment Centres.

Treatment Centres are held weekly as follows:-

	<u>Acle</u> <u>V.P.</u> <u>School.</u>	<u>Caister</u> <u>Parish</u> <u>Hall.</u>	<u>Norwich</u> <u>Aspland</u> <u>Road.</u>	<u>Thorpe Hillside</u> <u>Avenue C.P.</u> <u>School.</u>
Child Guidance Clinics	-	-	1 *	-
Dental Clinics	4	-	1	6
Speech Clinics	-	1	3	-

* Plus two sessions monthly for enuretics.

General Welfare.

General Welfare services under the National Health Service Act, 1946, are administered in the district by the Local Welfare Officers of the County Council. These services include the provisions of Home Helps in cases of old age, sickness and maternity etc., and it was possible to provide Home Help in almost every Parish of the district for necessitous cases.

Old People's Clubs have been established in the majority of Parishes in the district and there is no doubt that even an occasional afternoon meeting takes a great deal of monotony and loneliness out of old age.

The Local Welfare Officers have a contact point at Caister-on-Sea for the convenience of the public in that area and have acted in close co-operation with the Public Health and Housing Departments of the Council.

Ambulance Service.

This service is operated by the St. John Ambulance Brigade and British Red Cross Society as Agents of the County Council.

Vaccination and Immunisation.

This service is also the responsibility of the County Health Authority and is carried out by General Practitioners and by Assistant County Medical Officers.

Laboratory Facilities.

Facilities for Laboratory investigation are to be had at the Public Health Laboratory, Bowthorpe Road, Norwich, who are the suppliers of lymph for vaccination.

National Assistance (1948) Act, Section 47.

Nil cases.

SECTION 'C'
WATER SUPPLY.

Mains Supplies.

With the difficulties pertaining to the Coastal area having been transferred to the East Anglian Water Co., Ltd., no trouble was experienced in meeting the demands for water throughout the year and just over 84 million gallons were supplied from Strumpshaw headworks during 1965. Periodic bacteriological and Chemical Analyses were taken throughout the year, all of which proved satisfactory.

<u>Parish.</u>	<u>No. of dwellings connected.</u>	<u>Population supplied.</u>
Acle	371	986
Ashby-with-Oby	5	14
Beighton	103	309
Blofield	563	1,422
Brundall	574	1,510
Burlingham	272	832
Cantley	175	471
Freethorpe	149	423
Halvergate	101	278
Hemblington	77	197
Martham	390	1,069
Reedham	271	776
Repps	124	285
South Walsham	158	446
Strumpshaw	132	413
Thurne	41	103
Upton	129	327
Woodbastwick	43	150

39 Holiday Chalets connected Martham Riverside	}	Not included in
52 Holiday Chalets connected Repps Riverside		above figures.

Water Supply Cont'd.

Private Supplies.

The number of wells used for obtaining water for drinking purposes continues to decrease but there remain quite a number which have to date upon examination proved to yield water of satisfactory quality. During the year 50 samples were taken from shallow wells for chemical and bacteriological examination. Of these 17 were certified to be unfit for consumption and appropriate action was taken in each of these cases. 15 samples were also taken from swimming pools within the area, all of which were found to be satisfactory. 10 samples of river water were sent for examination for the purpose of ascertaining the degree of pollution.

Sewerage.

The majority of properties in the parishes of Blofield and Brundall situated on the line of sewer have been connected thereto. There remain however, a number which drain to cesspools and similar installations and these, to date, function satisfactorily. A few properties continue to use pail closets but it is expected that the pail closet collection service will be withdrawn during the latter part of 1966.

During 1965 the construction of a sewerage scheme for the coastal parishes was commenced. Work has proceeded rapidly and it is confidently expected that completion will be prior to the commencement of the 1968 holiday season.

Collection and Disposal of Refuse.

The weekly collection from pail closets in all parishes continued to operate satisfactorily. The re-arranged collection districts made it possible to operate for a part of the year with one less vehicle but the problem of disposal becomes more difficult each succeeding year and longer journeys to disposal points were necessary during 1965. The objectionable nature of the material gives rise to complaints from residents in areas where tipping takes place. 1,342 loads (approx. 1,147,000 gallons) were collected by 9 men using 3 vehicles. This is a lesser quantity than collected in 1964 principally due to the installation of the sewer for the parishes of Brundall and Blofield.

Collection and Disposal of Refuse Cont'd.

I am pleased to be able to record that a once weekly collection of dry refuse from all properties was operated throughout the district during 1965 with unbroken regularity. The volume to be collected continues to increase due no doubt, to the greater use of pre-packed food stuffs and other materials and the trend towards the use of oil fired and similar installations and the absence of open fire for burning household waste. Relatively bulky articles to be collected such as radio and television sets, washing machines etc., continue to increase in number, as do smaller items of unwanted furniture, all of which affect the service to a certain extent. I am again able to report that apart from one or two instances no difficulty has been experienced concerning dumped, scrapped cars. The abuse of the layby litter bins continued during 1965 and very frequently they were found to be filled with bulky articles left by passing motorists within minutes of being emptied. 30 men were employed throughout the year and 11 vehicles were in use for the dry refuse service and a total of 10,200 tons was collected and disposed of. The bulk of the refuse from the parish of Thorpe is dealt with by direct incineration, but from elsewhere by tipping at the 4 tips maintained by the Council. The additional land purchased at Caister was in use for part of the year but a tip fire prevented its use during the peak of the season. The ever present problems arising from nuisance from flies, smell, rats and fire were dealt with as effectively as possible. As stated in the 1964 Report unless an adequate supply of suitable covering material is readily available at all times, to completely cover the tip at the end of each working day, the nuisances referred to above, will and do occur. A crawler tractor has been purchased by the Council for use at Caister tip and this will undoubtedly reduce to a minimum, the nuisance present. Collection of refuse from established collection points along the banks of the rivers and broads was carried out very frequently during the holiday season and a further increase in the volume was noted. A few complaints were received concerning indiscriminate dumping in places inaccessible by road and in co-operation with a local land owner to whom thanks are due these dumps were cleared at the end of the season. During the year representatives of Councils and other interested bodies, again met on a number of occasions to discuss the question of the pollution of the rivers and broads. It is anticipated that progress towards a solution to this problem will continue during 1966.

Offices, Shops and Railway Premises Act, 1963.

Inspections as required under the provisions of the above mentioned Act continued throughout the year. 496 premises are registered under the Act and 156 inspections were made.

Cesspools.

A total of 9,831 loads of sewage were removed from cesspools and similar installations at a charge of 15s. Od., per load for the first load and 7s. 6d., per load thereafter at any single visit. Six one-thousand gallon emptiers were in use and by working long hours of overtime, in spite of the wet season, it was possible to give the service with a minimum of delay. A reference must once again be made to the unsatisfactory system of disposal of such a large volume of sewage i.e., 9,831,000 gallons. It will be noted the quantity of sewage removed during 1965 was less than in 1964. This was due to the installation of the sewer at Brundall and Blofield. The additional distance covered for the purpose of disposal however, offset any financial advantage that may have been gained thereby. An additional point for disposal was acquired at Rollesby and was available during the year but the method is of direct disposal to the land with the consequent potential danger to health.

Moveable Dwellings.

I am again able to report that during the year the caravan sites within the district were operated in accordance with the Council's standard conditions. These follow very closely those recommended by the Ministry. The problem of touring caravans was none the less during 1965 than in 1964 and many caravans were parked on laybys, roadside verges and unlicensed land for short periods during the peak weeks and verbal requests were received by site operators for permission to increase the density of their sites. During early August there was a total of 4,490 caravans in the district, housing an estimated population of 13,500.

Tent Sites.

During the latter part of July and throughout August as in previous years hundreds of tents and other types of temporary accommodation i.e., vans and various descriptions adapted for sleeping purposes were in use principally on land at Caister-on-Sea and at Fleggburgh. Unfortunately the season was wet which made conditions on the sites, particularly the marshland at Caister-on-Sea, very unsatisfactory. Many complaints were received and the visiting public do not understand the very limited control given to local authorities to deal with this problem. Legislation giving a more realistic degree of control is required. A count of tents in use in the District was made during the first week in August when it was found that there were 1,379, giving an estimated population of 4,000 in tents. This is a considerable drop from the figure for 1964, undoubtedly due to the very wet season.

Public Conveniences.

There are within the District twelve blocks of public conveniences, those at Acle and Martham having been completed since the last report. It is necessary to again refer to the need for conveniences at other points within the District particularly at Reedham and to a lesser extent at Brundall and Stokesby. Large numbers of persons are always to be seen in the vicinity of Acle Bridge during the summer months and it is not unreasonable to suggest the necessity of conveniences at this point and I would again remind the Council that those at Scratby, Hemsby (beach) and Caister (beach) are obsolete and will need replacement in the not too distant future.

Prevention of Damage by Pests Act.

The Council continued to employ 2 operators throughout the year to carry out inspections and to destroy rodents at dwellinghouses and other premises. Visits were made to 1,770 dwellinghouses, 840 business premises and 241 agricultural and other premises.

Meat Inspection.

One slaughterhouse was in use throughout the year and both the quality of the meat and the standard of cleanliness were good. The small knackers yard where only a limited amount of killing takes place operated satisfactorily throughout the year.

Milk.

There were 45 registered distributors operating during the year, 4 having been added since 1964. A few complaints were received concerning alleged contamination. These were referred to the Norfolk County Council, Food and Drugs Department.

Food and Drugs.

265 premises are registered as required by Section 16 of the Food and Drugs Act, 1955.

Food and Drugs Cont'd.

13 samples of ice cream were taken for bacteriological examination all of which were certified as satisfactory. The one ice cream factory continued to operate in a very satisfactory manner. A small quantity of canned and other foods was dealt with. Complaints concerning suspected infringements of Section 2 of the Food and Drugs Act, 1955 were referred to the Norfolk County Council, Food and Drugs Department, from whom the Council, as always, received the utmost co-operation.

Summary of Inspections.

Bakehouses	9	Pests	41
Drainage	255	Public and other	
Houses	977	conveniences	274
Moveable Dwellings	553	Slaughterhouses and	
Nuisances	104	Meat Inspection	207
Outworkers	17	Special and misc. visits	488
Piggeries	21	Food preparation and	
Public Cleansing	1,852	Handling premises	352

SECTION 'D'

HOUSING.

Council Houses.

The following is a list of houses erected by the Council:-

Under the Housing Acts:-

Pre-War	899
Post-War	1,003
Others	20
	<u>1,922</u>

At the end of the year outstanding applications for Council house accommodation numbered 550.

Of the dwellings under construction at the end of the year, 25 were to replace prefabricated bungalows and the remainder to rehouse occupiers of condemned properties.

As a result of action under the Housing Act, Demolition Orders were made in respect of 16 properties and a Closing Order in respect of one.

SECTION 'E'

CARCASES AND OFFAL INSPECTED AND CONDEMNED IN WHOLE OR IN PART
DURING 1965.

	<u>Cattle</u> <u>Excluding</u> <u>Cows.</u>	<u>Cows.</u>	<u>Calves.</u>	<u>Sheep</u> <u>and</u> <u>Lambs.</u>	<u>Pigs.</u>	<u>Horses.</u>
Number killed (if known)	522	18	12	204	1281	-
Number inspected	522	18	12	204	1281	-
<u>All diseases except</u> <u>Tuberculosis and</u> <u>Cysticerci.</u>						
Whole carcasses condemned.	1	-	-	-	4	-
Carcases of which some part or organ was condemned.	122	7	2	5	106	-
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci.	23.5	38.8	16.6	2.45	8.58	-
<u>Tuberculosis only.</u>						
Whole carcasses condemned.	-	-	-	-	-	-
Carcases of which some part or organ was condemned.	1	-	-	-	30	-
Percentage of the number inspected affected with tuberculosis.	.19	-	-	-	2.34	-
<u>Cysticercosis.</u>						
Carcases of which some part or organ was condemned.	4	-	-	-	-	-
Carcases submitted to treatment by refrigeration.	4	-	-	-	-	-
Generalised and totally condemned.	-	-	-	-	-	-

INCIDENCE OF INFECTIOUS DISEASES (EXCL. TB) DURING LAST
FIVE YEARS.

	<u>1961.</u>	<u>1962.</u>	<u>1963.</u>	<u>1964.</u>	<u>1965.</u>
Scarlet Fever	16	6	45	17	13
Measles	750	55	514	159	668
Whooping Cough	70	16	28	40	7
Pneumonia	43	31	26	20	8
Infective Jaundice	28	11	2	6	5
Erysipelas	4	4	2	4	3
Dysentery (Sonne)	18	13	9	2	15
Food Poisoning	13	7	1	13	5
Puerperal Pyrexia	2	1	1	2	1
Polio-myelitis (Paralytic)	-	-	-	-	-
Polio-myelitis (Non-Paralytic)	-	-	-	-	-
Paratyphoid Fever	-	-	-	-	-
Acute Encephalitis	-	-	-	-	-
Ophthalmia Neonatorum	-	-	-	-	-
Malaria	-	4	-	-	-
Meningococcal Infection	-	-	-	2	-
TOTALS	<u>944</u>	<u>145</u>	<u>628</u>	<u>265</u>	<u>725</u>

B.C.G. VACCINATION.

This offered to all 13 year old school children. 70% parents gave their consent, 24% refused consent and 6% did not return forms.

The findings during the year were as follows:-

Total number eligible	-	1156
number tested	-	699
number positive	-	67
Tuberculin Index	-	10.0
number vaccinated	-	596

TUBERCULOSIS - NEW CASES NOTIFIED DURING 1965.

	Respiratory.		Meninges & C.N.S.		Other.		Total.
	Male.	Female.	Male.	Female.	Male.	Female.	
Under 5 years	-	-	-	-	-	-	-
5 to 14 years	-	-	-	-	-	-	-
15 to 24 years	-	1	-	-	-	1	2
25 to 44 years	-	1	-	-	-	-	1
45 to 64 years	-	1	-	-	-	1	2
65 years and over	1	1	-	-	-	1	3
Age unknown	-	-	-	-	-	-	-
TOTALS	1	4	-	-	-	3	8

TUBERCULOSIS - NUMBER OF CASES ON REGISTER AT END OF 1965.

	<u>Male.</u>	<u>Female.</u>	<u>Total.</u>
Pulmonary	99	96	195
Non-Pulmonary	7	11	18
	106	107	213

DETAILS OF NEW CASES OF TUBERCULOSIS FOR LAST FIVE YEARS
(Excluding Inward Transfers from other Districts).

		<u>1961.</u>	<u>1962.</u>	<u>1963.</u>	<u>1964.</u>	<u>1965.</u>
Pulmonary	M	16	8	5	4	1
	F	9	33	4	3	4
Non-Pulmonary	M	2	2	-	2	-
	F	1	1	4	1	3
TOTALS		28	44	13	10	8

DIPHTHERIA IMMUNISATION.

The following is the number of primary immunisations and booster doses given during the last five years in Area No.1.

Year	<u>Primary Injections:</u>				<u>Booster Injections.</u>		TOTALS.
	Under 1	%	1 - 4	5 - 14	Under 5	5 - 14	
1965	284	33.5	635	23	239	1079	2260
1964	197	24	409	139	96	819	1660
1963	170	22	434	194	37	474	1309
1962	610	82	67	90	47	354	1168
1961	580	77.6	113	309	49	1700	2751

VACCINATION AGAINST SMALLPOX.

Vaccination of children under 5 years of age during the last five years in Area No.1.

	1961	1962	1963	1964	1965
No. of live births registered	748	744	763	871	847
No. of Vaccinations recorded (0 - 4 years)	475	620	210	377	472
Percentage Vaccinated	63.5%	83%	27.5%	43%	54%

VACCINATION AGAINST POLIOMYELITIS.

The following is the number of primary immunisations and boosters given in Area 1 since the scheme commenced. Table 'A' shows the numbers immunised with Salk Vaccine (by injection) and Table 'B' those given Sabin Vaccine (oral) which became generally available in 1962.

Table 'A' Salk.

Year	<u>Primary.</u>			<u>Booster (3rd)</u>		<u>Booster (4th)</u>	Total
	0 - 15	15+	Total	0 - 15	15+	5 - 12 yrs.	
1965	26	-	26	-	-	-	-
1964	24	-	24	5	1	-	6
1963	3	3	6	12	17	1	30
1962	204	134	335	456	1147	13	1616
1961	1112	1570	2682	835	1130	3526	5491
1960	786	1201	1987	1400	2102	-	3502
1959	1759	2311	4070	5793	1231	-	7024
1958	6665	225	6890	1707	-	-	1707
1957	1166	-	1166	-	-	-	-
1956	167	-	167	-	-	-	-

Table 'B' Sabin.

Year.	<u>Primary.</u>			<u>Booster (3rd after 2 Salk).</u>		<u>Booster (4th)</u>	TOTAL
	0 - 15	15+	TOTAL	0 - 15	15+	5 - 12 yrs.	
1965	883	17	900	-	8	562	570
1964	654	46	700	24	-	394	418
1963	703	166	869	110	52	553	715
1962	615	1249	1864	733	522	298	1553

SECTION 'F'
INFECTIOUS DISEASES.

Measles.

668 cases of measles were notified during the year compared with 159 in 1964. A vaccine against this condition is not yet available in this Area as there are some disadvantages in the vaccine so far produced.

Scarlet Fever.

13 cases were notified compared with 17 last year. Whilst scarlet fever itself is seldom a dangerous disease in this country, the germ which causes it is the haemolytic streptococcus and cannot be ignored, as both rheumatic fever and kidney disease can result from an infection which may be associated with a rash as in scarlet fever, but may merely cause a severe sore throat.

Whooping Cough.

7 cases were notified compared with 40 last year. The complaint is now seldom a serious one and immunisation must be responsible for this improved situation. In our Infant Welfare Clinics we commence immunisation against whooping cough, diphtheria and tetanus at about three months, giving second and third injections at four and five months respectively.

Pneumonia.

There were 8 cases compared with 20 last year.

Dysentery (Sonae).

There were 15 cases compared with 2 last year.

Infective Jaundice.

5 cases were notified compared with 6 cases last year, and 2 the year before. This is very satisfactory, as the complaint can be a most debilitating one, and largely because of the long incubation period of about a month it is very difficult to trace the source of any particular case.

Erysipelas.

3 cases were notified compared with 4 last year. The germ causing the complaint is the same as that causing scarlet fever and the remarks made above apply to this condition also.

Food Poisoning.

There were 5 cases of this complaint notified during the year compared with 13 last year.

Puerperal Pyrexia.

1 case was notified against 2 last year.

Part I of the Act

- (1) Inspection for purposes of provisions as to health (including inspections made by Public Health Inspectors).

	Number on Register.	Number of Inspections.	Number of written Notices.	Number of Occupiers prosecuted.
(i) Factories in which Sections 1,2,3,4 & 6 are to be enforced by Local Authorities.	12	19	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authorities.	93	59	-	-
(iii) Other premises in which Section 7 is enforced by Local Authorities (excluding Outworkers premises).	11	-	-	-
TOTALS	116	78	-	-

- (2) Cases in which DEFECTS were found

Particulars.	Found.	Remedied.	To H.M. Inspector.	By H.M. Inspector.	Number of cases in which prosecutions were instituted.
Want of Cleanliness (S.1)	-	2	-	-	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable temperature (S.3)	-	-	-	-	-
Inadequate ventilation (S.4)	-	-	-	-	-
Ineffective drainage of floors (S.6)	-	-	-	-	-
Sanitary Conveniences (S.7)					
(a) Insufficient	-	-	-	-	-
(b) Unsuitable or defective-	-	-	-	-	-
(c) Not separate for sexes -	-	-	-	-	-
Other offences against the Act (not including offences relating to Outwork).	-	-	-	-	-
TOTALS	-	2	-	-	-

PART VIII OF THE ACT

OUTWORK - (SECTIONS 133 AND 134).

Section 133

Section 134

Nature of Work.	No. of outworkers in August list required by Section 133.	No. of cases of default in sending lists to the Council.	No. of prosecutions for failure to supply lists.	No. of instances of work in unwholesome premises.	Notices Served.	Prosecutions.
Wearing - (Making etc. (Cleaning and Apparel (Washing.	18	-	-	-	-	-
Brush Making	-	-	-	-	-	-
Cosaguas, Christmas Crackers, Christmas Stockings etc.	-	-	-	-	-	-
TOTALS	18	-	-	-	-	-

